

POSITION	DATE	NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		49	5/29/01
FORMALITY REVIEW	H-S	866	66-26-01
RESPONSE FORMALITY REVIEW	Zm	927	10-04-01

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	6/19/03
2	10/28/03
3	11/28/05
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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10-4-2  
866  
6/26/01